

TOWN OF EATONVILLE

201 Center St W • P.O. Box 309
Eatonville, WA 98328
Phone: (360) 832-3361 • Fax: (360) 832-3977

APPLICATION FOR APPOINTMENT

I wish to be considered for appointment to the following committee or commission:

- | | |
|---|---|
| <input type="checkbox"/> Town Council Member | <input type="checkbox"/> Planning Commission Member |
| <input type="checkbox"/> Civil Service Commissioner | <input type="checkbox"/> Airport Commission |

Name: _____
(Please Print)

Address: _____ Mailing Address: _____

Phone (home): _____ Cell # _____

Email address: _____

City: _____ State: _____ Zip: _____

Present Employer: _____

Address: _____ Phone (work): _____

Hobbies/Interests: _____

Have you previously served or are you currently on one of the Boards or Commissions listed above? Yes _____ No _____ If yes, please specify: _____

Date available for appointment: _____

Are you a registered voter? Yes _____ No _____

Political Party (Civil Service Only) _____

Are you available to attend evening meetings? Yes _____ No _____

Are you available to attend daytime meetings? Yes _____ No _____

Approximately how many hours each month can you devote to Town business? _____

Recommended by: _____

Education: _____

Professional and/or community activities: _____

Please share some of your experiences or qualifications that relate to the work of this committee or commission: _____

Please explain why you would like to be part of this committee or commission: _____

If necessary, are you available for an interview prior to appointment? Yes ____ No ____

Attach additional pages if needed.

PLEASE RETURN THIS FORM TO:

TOWN OF EATONVILLE
201 Center Street West
P.O. Box 309
Eatonville, WA 98328
(360) 832-3361
(360) 832-3977 (Fax)

Signature: _____ Date: _____